

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**  
(FOR USE WITH FORM PTO-875)

SERIAL NO.  
**097762210**

FILING DATE  
**02 MAR 2001**

APPLICANT(S)  
*Wolfe*

**CLAIMS**

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.			1			
TOTAL DEP.			3			
TOTAL CLAIMS			4			

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	IND.	DEP.	IND.	DEP.	IND.	DEP.
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